## P12000011172

(Re	equestor's Name)	•
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VALERO N			
DOCUMENT NUMBER: P1200001117	<u>'2</u>		
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
YONI S VALERO	)		
	Name of Contact Person		
VALERO MEDIC	AL SUPPLIES CORP		
	Firm/ Company		
10805 NW 89 TH	TERR BUILDING 4 STE 213		
	Address		
DORAL FL 3317	8		
	City/ State and Zip Code		
E-mail address: (to be us	sed for future annual report notification)		
For further information concerning this matter, please	se call:		
YOU? S. MAIERO	at 786, 370.9977		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made	payable to the Florida Department of State:		
\$35 Filing Fee \$Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## VALERO MEDICAL SUPPLIES CORP.

(Name of Corporation as currently filed with the	e Florida Dept. of State)
P12000011172	
(Document Number of Corporation	n (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u> </u>
	The new
name must be distinguishable and contain the word "corpore "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," of word "chartered." "professional association," or the abbreviation	ution," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
	72
	<u> </u>
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	No Part Part Part Part Part Part Part Part
	္ညည္း ယူ
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
new registered agent and/or the new registered office addi	<del>ess:</del>
Name of New Registered Agent	<del></del>
	<u></u>
(Florida	ı street address)
New Registered Office Address:	, Florida
(0	(Lip Code)
New Registered Agent's Signature, if changing Registered Ag	ent.
I hereby accept the appointment as registered agent. I am famili	
Signature of New Register	ed Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

The second second

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John	Doe					
X Remove	<u>V</u> <u>Mik</u>	Mike Jones					
X Add	<u>SV</u> <u>Sally</u>	y Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s				
Change Add Remove	SECRETARY	YEANSKY MEDINA	10143 SW 161 AVE MIAMI FL 33196	_			
2) Change Add Remove	<del></del>			_			
3 ) Change Add Remove				_			
4) Change Add Remove				_			
5) Change Add Remove		<del></del>					
6) Change Add Remove				_			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself;  (if not applicable, indicate N/A)	ttach a	dditional sh	ng additional <i>(</i> eets, if necessar	y). (Be sp	ecific)	<del></del>		
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The date of each amendment(s) adoption: 06/12/2012				
Effective date if applicable:				
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.			
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):			
"The number of votes cas	for the amendment(s) was/were sufficient for approval			
by	(voting group)			
	(voting group)			
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder			
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder			
Dated 06/12/	2012			
Signature				
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)			
	YONI S VALERO			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			